



## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

**Application or Docket Number** 

10/525513

| -  |  |                                  |  |                               | <b></b>                                   |                                 |          |                     |                        |    |                         |                        |
|--|--|----------------------------------|--|-------------------------------|---|---------------------------------|----------|---------------------|------------------------|----|-------------------------|------------------------|
| CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)   |  |                                  |  |                               |   |                                 |          | SMALL ENTITY TYPE   |                        | OR | OTHER                   |                        |
| U.S. NATIONAL STAGE FEES   |  |                                  |  |                               | <u> </u>                                  |                                 | 7        | RATE                | FEE                    |    | RATE                    | FEE                    |
| BAS  | IC FEE   |                                  | SMALL ENT. = \$ 150  |                               | LARGE ENT. = \$ 300                       |                                 | ,        | BASIC FEE           |                        | OR | BASIC FEE               | 300                    |
| EXA  | MINATION FE                                    | Ē                                |  | Article 33(1)-<br>50 / \$ 100 | All other situations =<br>\$ 100 / \$ 200 |                                 | 7        | EXAM. FEE           |                        |    | EXAM FEE                | 200                    |
| SEA  | RCH FEE  |                                  | U.S. is ISA = \$50/\$100<br>ALL other countries =<br>\$200/\$400 |                               |   | er situations =<br>250 / \$ 500 |          | SEARCH FEE          |                        |    | SEARCH FEE              | 40)                    |
| FEE  | FOR EXTRA S                                    | PEC. PGS.                        | m  | inus 100 =                    |   | / 50 <b>≐</b>                   |          | X \$ 125 =          |                        |    | X \$ 250 =              |                        |
| тот  | AL CHARGEAE                                    | ILE CLAIMS                       | 15 minus 20 = .  |                               |   |                                 |          | X \$ 25 =           |                        | OR | X \$ 50 =               |                        |
| INDE   | PENDENT CL                                     | AIMS                             | 1  | minus 3 =                     | •   |                                 |          | X \$ 100 =          |                        | OR | X \$ 200 =              |                        |
| MUL  | TIPLE DEPENI                                   | DENT CLAIM PR                    | RESENT   |                               |   |                                 |          | + \$ 180 =          |                        | OR | + \$ 360 =              |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |                                  |  |                               |   |                                 |          | TOTAL               |                        | OR | TOTAL                   |                        |
| 2 24 CLAIMS AS AMENDED - PART II  05 (Cotumn 1) (Cotumn 2) (Cotumn 3)  |  |                                  |  |                               |   |                                 | <u>)</u> | SMALL ENTITY        |                        | OR | OTHER THAN SMALL ENTITY |                        |
| AMENDMENT A  | CLAIMS REMAINING AFTER AMENOMENT               |                                  |  | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                              | PRESENT<br>EXTRA                |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|  | Total  | • 15                             | Minus  | - 2                           | Q   | =                               |          | X \$ 25 =           |                        | OR | X \$ 50 =               |                        |
|  | Independent                                    | •                                | Minus  | ***                           | 3   | 5                               |          | X \$ 100 =          |                        | OR | X \$ 200 =              |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |  |                               |   |                                 | ].       | + \$ 180 =          |                        | OR | + \$ 360 =              |                        |
| TOTAL ADDIT. OR TOTAL ADD  |  |                                  |  |                               |   |                                 |          |                     |                        |    | TOTAL ADDIT.<br>FEE     |                        |
|  | •  | (Column 1)                       |  | (Colur                        | nn 2)                                     | (Column 3                       | 1)       |                     |                        |    |                         |                        |
| AMENDMENT B  | ·  | CLAIMS REMAINING AFTER AMENDMENT |  | HIGH<br>NUM<br>PREVIO<br>PAID | EST<br>BER<br>OUSLY                       | PRESENT<br>EXTRA                | Í        | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •                                | Minus  | **                            |   | =                               |          | X \$ 25 =           |                        | OR | X \$ 50 =               |                        |
|  | Independent                                    | •                                | Minus  | •••                           |   |                                 |          | X \$ 100 =          |                        | OR | X \$ 200 =              |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |  |                               |   |                                 |          | + \$ 180 =          |                        | OR | + \$ 360 =              |                        |
|  |  |                                  |  |                               |   |                                 |          | TOTAL ADDIT.<br>FEE |                        | OR | TOTAL ADDIT.<br>FEE     |                        |
| " If the entry in column 1 is tess than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is tess than "20", enter "20". ""If the "Highest Number Previously Paid For" IN THIS SPACE is tess than "3", enter "3". |  |                                  |  |                               |   |                                 |          |                     |                        |    |                         |                        |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.